	A	Amend	lment	
Disclosure Report Cover	 [Yes	\boxtimes
(I this Come Company of the American information	must be signed and submitted along with ath	or do	tailed forms	

Disclosure Re						Yes No
	eneral report and committee	informatio	on, must be s	signed and sub	mitted along with	other detailed forms.
Do not use this forn	n to update information					
1. Committee Info	rmation					
a. Full Name						c. ID Number
Anne M. Simpson	for Commissioner		D	ECEN	/ED	5JMFOX
b. Mailing Address (inc	clude City, State and Zip Code)		- H	ECEIV	ED	d. Date Filed
2517 Trading Ford				JAN 2 6 20	040	01/26/2018
Waxhaw, NC 2817				JAN Z U Z	010	
			Unic	n Co. Board of	Elections	e. Phone Number
						704-256-4976
2. Report Year 3. Period Start Date (mm/dd/yy) 4. Period (mm/dd/yy)			4. Period E (mm/dd/yy)	End Date 5. Treasurer Full Name		
2017	2017 10/23/2017 12			1/2017	Anne Marie Si	mpson
6. Type of Commit	ttee (Check One)	9. Type	e of Report	(check on	ly one type of rep	ort from one category)
Candidate Camp	oaign Party	Municip	al	State/C	County	Referendum
PAC	Referendum		Organizational		Organizational	Organizational
Independent Expenditure Legal Expense I	Joint Fundraiser		Thirty-five day		Quarterly	Pre-referendum
7. Type of Fund	(if applicable, check one)		Pre-primary		First	Final
"Booster Fund"	(y appricable, entent ente	7 = -	Pre-election	15	Second	Supplemental Final
Building Fund			Pre-runoff Third			Annual
		-	Semi-annual Fourth			Special
			Mid Year	*	Semi-annual	100
Other:		\boxtimes	Year End		Mid Year	10. Special Report Name
			Final		Year End	
8. Number of Fund	draisers this Report		Special		Final	9
	0				Special	
11. Account Inform	nation			11. Account	Information	
a. Financial Institution	Full Name			a. Financial Ins	titution Full Name	
Wells Fargo						
b. Purpose	c. Account Code			b. Purpose		c. Account Code
Campaign Organization		1				
	d. Period Begin Balan	ce				d. Period Begin Balance
	\$ 156.38					\$
CERTIFICATION	v					
I certify that the Co the NC General Sta	nmmittee or Fund is in comp tutes and that no funds are c d correct and that I have bee Simpson	ommingle	ed with prohiby the NC S	ibited or other tate Board of I	non-disclosed fur Elections.	2B, & 22D-22M of Chapter 163 of ands. I further certify that this report
	Printed Name of Signer		Si	gnature of Appoir	nted Treasurer	Date
Partice USE Date Received	1/2//10	-	Employee:	Ka	rumh	Delivery Method Normal Mail
Date Postmark	ed: NA	•	Employee:	Klo	nin	Registered Mail Hand Delivered Electronically Filed

Date Scanned: Employee: Signer has not received mandatory training

Employee:

Date Data Entered:

Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.

You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

Detailed	Summary
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Amendment

Yes No

Use this form to summarize all disclosure reporting forms and to total monetary information.

	pe of Report	3	I. ID Number
Anne M. Simpson for Commissioner Year Repo		5	SJMFOX
	17	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 156.38	\$ 0
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$
6) Contributions from Individuals	(CRO-1210)	\$ 0	\$ 1087.21
7) Contributions from Political Party Committees	(CRO-1220)	\$	\$
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$
9) Loan Proceeds	(CRO-1410)	\$ 0	\$ 1100
10) Refunds/Reimbursements To the Committee	(CRO-1240)	\$	\$
11) Other Receipt Sources			
11a) Interest on Bank Accounts	(CRO-1250)	\$	\$
11b) Contributions from Not-for-Profit Organizations	(CRO-1250)	\$	\$
11c) Outside Sources of Income	(CRO-1250)	\$	\$
11d) Legal Expense Fund – Other Sources	(CRO-1270)	\$	\$
11 e) Exempt Purchase Price Sales	(CRO-1265)	\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d d	and 11e)	\$ 0	\$ 2187.21
EXPENDITURES			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 49.00	\$ 997.62
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$	\$
13c) Coordinated Party Expenditures	(CRO-1310)	\$	\$
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$	\$
15) Loan Repayments	(CRO-1420)	\$	\$
16) Refunds/Reimbursements From the Committee	(CRO-1320)	\$	\$
17) In-Kind Contributions	(CRO-1510)	\$ 0	\$ 1082.21
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 a	nd 17)	\$ 0	\$ 2079.83
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract li	ine 18)	\$ 107.38	\$ 107.38
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$ 1100	
22) Debts and Obligations owed By the Committee	(CRO-1610)	\$	
23) Debts and Obligations owed To the Committee	(CRO-1620)	\$	
24) Account Transfers Within the Compute EIVE) (CRO-1720)	\$	
25) Administrative Support JAN 2 6 2018	(CRO-1710)	\$	\$
26) Forgiven Loans	(CRO-1440)	\$	\$
27) 48-Hour Notice Reports Sum Union Co. Board of Electic	ODS (CRO-2220)	\$	\$
28) Contributions to be Refunded	(CRO-1215)	\$	\$

	report expenditures		ee fo	Pg or; operating expenses,	1 of 1 contributions to co	Amendment Yes No andidate/political
	coordinated party ex ull Name (and Fun					2. ID Number
	on for Commissione					5JMFOX
3. Type of Disbu	en compatibility community to be contributed by the compatibility of the contributed of t	ta tatanatan managanta taman 1975 mengani belang tahun 1976 mengan	RO-	1310 forms for each t	ype of Disburseme	<u>ent.)</u>
Operating E			ndida	tes/Political Committees		rdinated Party Expenditures
4. Payee Inform			A		Remove	
	ng Address & Phone		b.	Coordinated Committee Na	ame	d. Comments
(include city, state,	· · · · · · · · · · · · · · · · · · ·		-			
Wells Fargo Bar			-	Level Registered (Specify)		
5926 Weddington-Monroe Rd Wesley Chapel Nc 28104		E.	Federal Specify			
704-243-4024		-	State	County: Municipality:	e. Election Sum to Date	
701 215 1021				<u> </u>		
						\$ 40
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Draft	К			\$40	Bank Fees
1	Drait	Λ.			Φ40	
					\$	
4. Payee Inform	 afion		A	ld 🗍	Remove	
	ng Address & Phone			Coordinated Committee N	Continue to the Continue to th	d. Comments
(include city, state,						
Facebook						
1601 Willow Ro	oad		c.	Level Registered (Specify)		
Menlo Park, CA	94025-1452		Federal County:			
				State 🔀	Municipality:	e. Election Sum to Date
						\$ 9
f. Account Code	g. Form of Payment	h. Purpose Code	<u> </u>	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
						Post promotion
Ĭ	Draft	Α		12/01/2017	\$9	-
					\$	
	•			11 [7]		
4. Payee Inform		LI	A.	ld Coordinated Committee N	Remove	3 C
	ng Address & Phone		В.	Coordinated Committee ix	ame	d. Comments
(include city, state,			1			
R	ECEIVE	D	c.	Level Registered (Specify)		
	F 832874 - 4000 - 100000 N 10 100000		Г	Federal	County:	
	JAN 2 6 2018			State	Municipality:	e. Election Sum to Date
						\$
Uni	ion Co. Board of Elect		<u> </u>		.,	
f. Account Code	g. Form of Payment	h. Purpose Code		i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
					\$	
					\$	
5. Total only th	is Done					\$
A STATE OF THE PROPERTY OF THE	CRO-1310 Pages					*
	line 13a of Detailed Sun	mary Page CRO-110	0 if (Operating Expenses)		dh .
•	-			Contrib to Candidates/Politic	cal Comm)	\$
				Soordinated Party Expenditu		
	es (List detailed ex					
A* - Media	B* - Printing	C* - Fund		-	D - To Anothe	
E - Salaries I - Postage	F* - Equipment J - Penalties	G - Politic K* - Offic				Public Office Expenses n to Legal Expense Fund
O* - Other	o - 1 chaines	E - Our	ee Eu	apvilous	Z - Donation	a to moder malerines r and
and the second s	e detailed explanat	ion in required r	ema	rks field (k)		

Outstanding Loans

				Amen	dment		
Pg	<u>1</u>	of	1		Yes	\boxtimes	No

Use this form to report any outstanding loans received during a previous reporting period and until the loan is paid in full.

1. Committee Full Na	2. ID Number				
Anne M. Simpson for	5JMFOX				
2 Lorday Later	n 🔀 Ad	A	Remove		
3. Lender Informatio			tle/Profession	d. Comments	
a. Full Name, Mailing Address & Phone (include city, state, & zip)			ered Nurse	Self	
Anne Marie Simpson	7	INSIGN	204 214100		
2517 Trading Ford Dr	e. Start Date (mm/dd/yyyy)				
Waxhaw, NC 28173		yer's Name/Specific Field	07/20/2017		
704-256-4976		ì	nas Healthcare		
		System	IS	f. End Date (mm/dd/yyyy)	
z. Rate h. Security Pledged i. Original Loan Amount				j. Remaining Loan Balance	
0 %	na	\$ 300			
k. Full Name of Lending I	nstitution			1. Loan Number	
Self				1	
3. Lender Informatio	n 🗍 Ad	d	Remove		
a. Full Name, Mailing Add		0	tle/Profession	d. Comments	
(include city, state, & zij		Registe	ered Nurse	Self	
Anne Marie Simpson					
2517 Trading Ford Dr	•			e. Start Date (mm/dd/yyyy)	
Waxhaw, NC 21873			yer's Name/Specific Field	07/28/2017	
704-256-4976			nas Healthcare	f. End Date (mm/dd/yyyy)	
		System	I	i. End Date (min/dd/yyyy)	
g. Rate	h. Security Pledged		i. Original Loan Amount	j. Remaining Loan Balance	
0 %	na		\$ 800	\$ 800	
k, Full Name of Lending I	nstitution			l. Loan Number	
Self				2	
3 Landor Informatio	n 🗍 Ad	d	Remove		
3. Lender Informatio a. Full Name, Mailing Add		SECRETARIST PRODUCTION	tle/Profession	d. Comments	
(include city, state, & zi					
n Bernell' Bure					
,	CEIVED			e. Start Date (mm/dd/yyyy)	
		c. Emplo	yer's Name/Specific Field	e. Start Date (mm/dd/yyyy)	
	AN 2 6 2018	c. Emplo	yer's Name/Specific Field		
J		c. Emplo	yer's Name/Specific Field	e. Start Date (mm/dd/yyyy) f. End Date (mm/dd/yyyy)	
J	AN 2 6 2018	c. Emplo	yer's Name/Specific Field		
J	AN 2 6 2018	c. Emplo	yer's Name/Specific Field i, Original Loan Amount		
J	AN 2 6 2018 Co. Board of Elections	c. Emplo		f. End Date (mm/dd/yyyy)	
J Union g. Rate	AN 2 6 2018 Co. Board of Elections h. Security Pledged	e. Emplo	i. Original Loan Amount	f. End Date (mm/dd/yyyy) j. Remaining Loan Balance	
J Union g. Rate %	AN 2 6 2018 Co. Board of Elections h. Security Pledged	c. Emplo	i. Original Loan Amount	f. End Date (mm/dd/yyyy) j. Remaining Loan Balance	
J Union g. Rate %	AN 2 6 2018 Co. Board of Elections h. Security Pledged	c. Emplo	i. Original Loan Amount	f. End Date (mm/dd/yyyy) j. Remaining Loan Balance \$ l. Loan Number	
J Union g. Rate %	AN 2 6 2018 Co. Board of Elections h. Security Pledged nstitution	c. Emplo	i. Original Loan Amount	f. End Date (mm/dd/yyyy) j. Remaining Loan Balance	